Effective October 1, 2001 9/852, 102									
CLAIMS AS	PART I	(Column 2)		SMALL ENTITY TYPE		OR	OTHER THAN R SMALL ENTITY		
TOTAL CLAIMS					FIATE	FEE	7	RATE	FEE
FOR GUMBER		FICEO	เสเหพิ	EREYTRA	B#SIC F	<b>EE</b> 370 00	OR	BASIC FEE	740 00
TOTAL CHARGEABLE CLAIM:	minus 20= *				X\$ 9=	:	OR	X\$18=	
INDEPENDENT CLAIMS	minus 3		-		X42=		1		<del> </del>
MULTIPLE DEPENDENT CLAIM PR	RESENT				+140=	_	OR		·
If the difference in column t is to	ess than ze	io, enter	O" in c	olumn 2	TOTAL		NOR.	L	
CLAIMS AS AMENDED - PART II					0.7170	· L	] CH		L
(Column 1) (Column 2) (Column 3)						ENTITY	OR	OTHER SMALL	
CLAIMS REMAINING AFTER AMENDMENT Total Independent  CLAIMS REMAINING AFTER AMENDMENT  LOCAL ACCURATE AMENDMENT  AMENDMENT  LOCAL ACCURATE AMENDMENT  AMENDMENT  LOCAL ACCURATE AMENDMENT  AMENDMENT  AMENDMENT  LOCAL ACCURATE AMENDMENT  LOCAL ACCURATE AMENDMENT  AMENDMENT  LOCAL ACCURATE AMENDMENT  AMENDMENT  LOCAL ACCURATE AMENDMENT  LOCAL ACCURATE AMENDMENT  AMENDMENT  LOCAL ACCURATE AMENDMENT  LOCAL ACCURATE AMENDMENT  AMENDMENT  LOCAL ACCURATE AMENDMENT  LOCAL AC		HIGHES NUMBE PREVIOU PAID FO	R	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Total . 40	Minus	46	2	=	X\$ 9=		OR	X\$18=	
Independent 2 FIRST PRESENTATION OF MUI	Minus	*** <u>3</u>	21.614.4	=	X42=	/	OR	X84=	·
. FIRST PRESENTATION OF MOI	LTIPLE DEP	ENDENT C	LAIM		+140=		OR.	+280=	
					TOTAL	•	OR,	JATOT	
_ (Column 1)		(Column	(2)	(Column 3)	ADDIT FEE	: L	1 - 7	ADDIT FEE	:
CLAIMS REMAINING AFTER AMENOMENT  Total  Independent		HIGHES NUMBE PREVIOU: PAID FO	R SLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	:ADDI- TIONAL FEE
Total *	Mińus	*4		= .	X\$ 9=		OR	X\$18=	
Independent *	Minus	***		=	X42=		OR	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									<del></del>
	٠				+140=		OR	+280= TOTAL	3
	,				ADDIT. FEE		OR ,	ADDIT. FEE	·
(Column 1)	Section Commences	(Column		(Column 3)	<u>:</u>		_		
CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOU: PAID FO	R SLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT  Total  Independent	Minus	**		=	X\$ 9=		OR	X\$18=	. :
Independent I	Minus	***		=	X42=		OR	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					<u>                                     </u>	ļ	UH		
★ If the entry in column 1 is less than the entry in column 2, write *0* in column 3.					+140=		OR	+280=	
**If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."					TOTAL ADDIT, FEE		OR A	TOTAL ODIT. FEE	
The Highest Number Previously Paid					found in the a	propriate box	do colu	ımn 1.	